DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

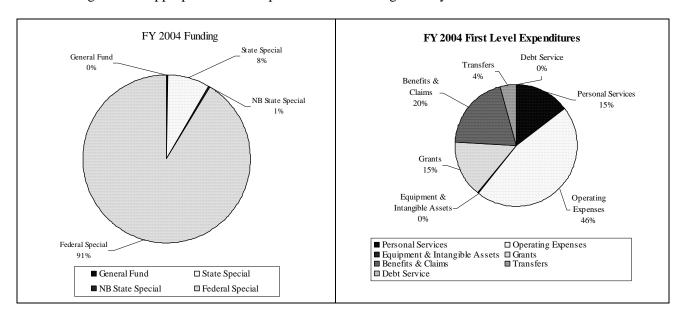
Public Health and Safety Division

WHAT THE DIVISION DOES

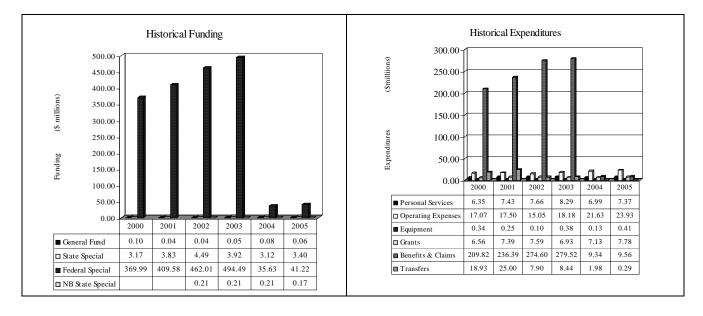
The Public Health and Safety Division provides services aimed at promoting healthy lifestyle behaviors, preparing for public health emergencies, and monitoring the spread of infectious diseases. The division operates two laboratories, one focusing on environmental health and the other on public health, including testing of newborn children.

SPENDING AND FUNDING INFORMATION

The following figures show funding and expenditure information for FY 2004 for all sources of funding of the Public Health and Safety Division. Because the figures include all sources of funding there are no direct relationships between these figures and appropriation levels presented in the Budget Analysis for the 2007 Biennium.



The following figures show funding and expenditures from FY 2000 through FY 2005, for HB 2 funding.



HOW SERVICES ARE PROVIDED

The division is organized into six bureaus with the following functions:

- 1) Financial Services and Operations Bureau provides operations support for files, records, and equipment management, budget analysis, contract procurement, financial management, and information and data analysis. Also completes Montana Asbestos screening and surveillance activity.
- 2) Communicable Disease Control and Prevention Bureau Works with local health departments and medical providers on preventing or reducing the spread of communicable diseases including tuberculosis, hepatitis, HIV, and sexually transmitted diseases. The bureau also operates a vaccination program for children. They license pools and trailer courts, public housing and accommodations, institutions and daycares. They work with local health departments on food safety. The bureau also does lead poisoning prevention.
- 3) Family and Community Health Bureau operates Women, Infant, and Children Supplemental Nutrition Program (WIC), oversees newborn screening, manages the Maternal Child and Health grant to counties, women's and men's reproductive health programs, child, adolescent and community health programs, data monitoring relating to birth outcomes, pregnancy risk and Maternal and Child Health data management.
- 4) Laboratory Services Bureau operates the environmental and clinical health laboratories for the state. The environmental laboratory does water and soil analysis and completes EPA certification of private laboratories for drinking water testing. The clinical health lab completes biotechnology and microbiology tests to determine the presence of disease antibodies such as hantavirus or tuberculosis.
- 5) Chronic Disease and Health Promotion Bureau manages the tobacco use prevention community and cessation programs, cancer control programs including breast and cervical health and the tumor registry, diabetes prevention and cardiovascular health and emergency medical services and trauma systems.
- 6) Public Health System Improvement and Preparedness Bureau oversees the bioterrorism preparedness grant and works with local health departments in strategic plan implementation, preparedness planning, health planning and tracking systems and public health informatics such as the health alert network.

2005 BIENNIUM NEW PROGRAM IMPLEMENTATION AND PROGRAM EXPANSION

Program Expansion

Public Health and Safety Division implemented or expanded several programs with federal funding in the 2005 biennium. The Obesity Prevention Program, Montana Breast & Cervical Health Program

Diabetes Program, Family Planning Program, and the Immunization Program expansions were implemented at the time the funding was received, prior to July 1, 2003. Bioterrorism programs were expanded over the biennium, with the majority of the program expansion implemented by June 2004.

CORRECTIVE ACTION PLANS

The Public Health and Safety Division did not have any audit recommendations or corrective action plans in place during the 2005 biennium.

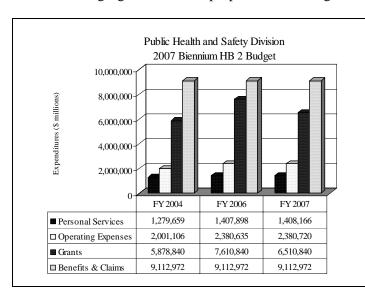
FTE

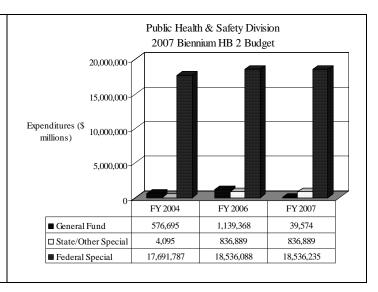
2003 Legislature approved appropriations for an additional 30.50 FTE in the 2005 Biennium all through federal grants. The following figure shows the positions and hire dates for the new FTE.

2005 Biennium FTE Hire Dates			
		Hired	
Family Planning	0.5	7/1/2003	
Obesity Prevention Program	2	7/1/2003	
Behavior Risk Factor Surveillance Coordinator	1	7/1/2003	
Fetal Alcohol Syndrom Coordinator	1	7/1/2003	
WIC Administrative Support	1	7/1/2003	
Montana Breast & Cervical Cancer Program	1	7/1/2003	
Epidemiology Support for Diabetes Program	0.5	7/1/2003	
School Health Coordinator	1	7/1/2003	
Cardiovascular Disease	1.5	7/1/2003	
Environmental Health Tracking	2	7/1/2003	
Libby Asbestos Screening	2	7/1/2003	
Primary Care Recruitment of Local Medical Providers	0.5	7/1/2003	
Distance Learning Coordinator	1	7/1/2003	
Bioterroris m Preparedness	15.5	9/1/2003	

2007 BIENNIUM BUDGET

The following figures show the proposed HB 2 budget for the 2007 biennium.





Goals and Measures

The following figure shows the department base year and budgeted biennium goals and performance measures that are associated with the proposed 2007 biennium HB 2 budget.

Department of Public Health and Human Services Public Health and Safety Division		
Performance Measures for the 2007 Biennium		
Goal	Primary Measures	
Provide programs and services to improve the health of Montana's women	By 2008 reduce birthrate for teenagers aged 15-17 to 16 per 1,000 By 2008 reduce deathrate for children 0-14 for vehicle crashes to 4.2 per 100,00. By 2008 increase the percentage of newborns screened for hearing before hospital discharged to 98% Increase percentage of infants born to pregnant women receiving prenatal care beginning in the first trimester to 87.5%	
Reduce the incidence of communicable disease in Montana citizens through efforts in prevention, treatment, surveillance, and epidemiology	By 2008, achieve and maintain a 90% immunization coverage rate for children 19-35 months By 2008, increase to 100% the tuberculosis cases completing curative therapy within 12 months Increase the rate of compliance with food safety regulations by licensed establishments by 5% annually through 2008 By 2008, reduce the incidence of Chlamydia to 150 cases per 100,000 Maintain or lower the incidence of HIV/AIDS in Montana (1.4 per 100,000 persons, 2003) through 2008	

Reduce the burden of chronic disease, injury, and trauma in Montana	By July 2005, develop and adopt a statewide Emergency Medical Services (EMS) Plan that documents the current status of the state EMS system and a work plan for continued development and improvement of the system By 2008, increase community awareness of the warning signs of acute myocardial infarction and stroke and the need to use 911 emergency medical service By 2008 increase the proportion of people with diabetes in Montana who receive recommended treatments to meet the Healthy People 2010 national health objective' By 2008, decrease the proportion of high school students (grades 9-12) who report using cigarettes in the past 30 days to 16% and decrease the proportion of students (grades 9-12) who use cigarettes before the age of 13 to the Healthy People 2010 target By 2008 create an integrated and coordinated cancer prevention and control program to increase the capacity, quality, and accessibility of cancer prevention and control
Reduce communicable disease in Montana through a surveillance system based health laboratory disease diagnosis and assessment	Maintain at 100% access of local health departments and other public clinics to accurate, reliable, population-based laboratory services Maintain the state's capacity to provide technically advanced laboratory testing for conditions that affect the health of Montanans, including unusual and emerging diseases Maintain a communication system with Montana hospitals, clinics, and infectious disease physicians for the purpose of providing updated information on infectious diseases Continue to provide testing capable of monitoring public drinking water according to current EPA standards and to ensure Maintain laboratory preparedness for testing agents of bioterrorism, and continue to develop methods of meeting expectations regarding testing for agents capable of being used for chemical terrorism
A strong public health system that provides the foundation for Montanans to live safe and healthy lives	By 2008, 90% of local and tribal jurisdictions, as well as hospitals, participate in multi-jurisdictional public health and medical emergency response plans that are exercised, evaluated, and improved annually By 2008, modernize Montana's public health statutes to reflect current, state-of-art public health practices. By 2008 85% of Montana's public health workforce will receive public health training and continuing education By 2008 develop a Public Health Information Network to improve disease surveillance and substantially integrate with major public health programs

BUDGET AND POLICY ISSUES

The following budget or policy issues are included in the divisions budget submission to the Governor's Office.

- o Increase federal funding by \$16 million dues to increases in federal funds, use a portion of the funding for 12 new FTE
- Continued use of the prevention and stabilization account created by 2003 Legislature diverting a portion of the funding from tobacco programs to funding the Montana Initiative for the Abatement of Mortality in Infants, poison control and AIDS treatment and prevention functions
- o Increase of general fund for tobacco control and prevention function and reduce tobacco settlement revenues

MOST SIGNIFICANT ISSUES EXPANDED

Increases in Federal Funds

The most significant federal grant funding changes are

- o Bioterrorism and emergency preparedness increases \$2 million annually
- o Cardiovascular health increases \$0.6 million annually
- o Tobacco use prevention and quit line increases \$0.4 million annually
- o Laboratory capacity increase \$0.4 million annually
- o Breast and cervical cancer screening and obesity prevention increases \$\$0.6 million annually
- o New disability and health grant adds \$0.45 million annually
- o New emergency preparedness and rural health grant adds \$0.4 million annually
- Comprehensive cancer control grant adds \$0.2 million annually

Continued Use of the Prevention and Stabilization Account

The Prevention and Stabilization Account was created and funding appropriated during the 2003 Legislative Session in SB 485. The majority of the funding comes from the tobacco settlement funds. The continued use of the account provides funding for the Montana Initiative for the Abatement of Mortality in Infants, AIDS treatment and prevention, and poison control at the level of the 2005 biennium. These services are scheduled to terminate on June 30,2005 due to one-time-only funding of SB 485.

General Funds for Tobacco Control and Prevention

The division is requesting a biennial increase of \$167,058 in federal funds, along with a reduction of \$367,983 in state special spending authority form the Prevention and Stabilization Account and an offsetting increase of \$367,983 in general fund. This will fund the Montana Tobacco Use Prevention Program at the FY 2004 base level. This reduction in PSA funds is a reflection of projected decreasing revenues from tobacco settlement payments.

DIVISION CONTACTS

The division director and chief financial officer for the department and their contact information are:

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